Case 19-32739-RG Doc 74 Filed 11/02/20 Entered 11/02/20 22:16:28 Desc Main Document Page 1 of 7

Fill in this information to identify your case:						
Debtor 1	John Cosares					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY				
Case number	19-32739					
(if known)						

■ Check if this is an amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

Pa	rt 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	1,222,571.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	3,300.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	1,225,871.00
Pa	rt 2: Summarize Your Liabilities		
			liabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	1,486,892.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	0.00
	Your total liabilities	\$	1,486,892.00
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	12,982.10
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	8,593.08
Pa:	rt 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	r other s	chedules.
7.	■ Yes What kind of debt do you have?		

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

the court with your other schedules.

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Debtor 1 John Cosares Case number (if known) 19-32739

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______9,294.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$0	0.00

							_				
Fill	in this information	to identify your ca	ase:								
Del	otor 1	John Cosare	9 S								
1	otor 2 ouse, if filing)										
Uni	ted States Bankru	ptcy Court for the	DISTRICT OF NEW J	ERSEY		_					
Ca	se number 1	9-32739					Che	ck if this is:			
(If kı	nown)			-				An amende	ed filing		
								A suppleme 13 income			etition chapter date:
<u>O</u>	fficial Forn	<u> 106l</u>					ī	MM / DD/ Y	YYY		
S	chedule I:	Your Inc	ome								12/1
sup spo atta	plying correct in use. If you are se ch a separate sh	formation. If you eparated and you	ible. If two married peo are married and not filir r spouse is not filing w On the top of any additi	ng jointly, and your s ith you, do not includ	oouse e infor	is liv mati	/ing with on abοι	n you, incl nt your spo	ude inforr ouse. If m	nation a ore spac	bout your ce is needed,
1.	Fill in your emp										
••	information.	,		Debtor 1				Debtor 2	or non-fi	ling spo	ouse
	If you have more attach a separat		Employment status	Employed				☐ Emplo	•		
	information about additional			☐ Not employed				☐ Not employed			
	employers.		Occupation								
	Include part-time self-employed w		Employer's name	Nestor Imports,	INC						
	Occupation may or homemaker,	include student if it applies.	Employer's address	8403 7th Ave Brooklyn, NY 112	228						
			How long employed t	here?				_			
Pai	t 2: Give D	etails About Mor	thly Income								
	mate monthly inc use unless you are		ate you file this form. If	you have nothing to re	oort for	any	line, writ	e \$0 in the	space. Ind	clude yo	ur non-filing
	u or your non-filin e space, attach a		ore than one employer, co	ombine the information	for all	empl	oyers fo	that perso	on on the li	nes belo	w. If you need
							For De	btor 1		btor 2 o	
2.			ry, and commissions (becalculate what the monthle		2.	\$		2,306.00	\$		N/A
3. Estimate and list monthly overtime pay. 3.			+\$		0.00	+\$		N/A			

2,306.00

\$

N/A

4. Calculate gross Income. Add line 2 + line 3.

Deb	otor 1	John Cosares	-	C	ase number (if known)	19-3	2739		
				1	For Debtor 1		Debtor	2 or	
	Cop	y line 4 here	4.	,	2,306.00	\$	9	N/A	_
5.	List	all payroll deductions:							
	5a.	Tax, Medicare, and Social Security deductions	5a.	. :	33.46	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.		0.00	\$_		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.	. (0.00	\$_		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	. (0.00	\$		N/A	_
	5e.	Insurance	5e.	. :	0.00	\$		N/A	=-
	5f.	Domestic support obligations	5f.	,	0.00	\$_		N/A	_
	5g.	Union dues	5g.	. (0.00	\$		N/A	
	5h.	Other deductions. Specify: State Tax NJ	5h.	.+ \$	35.38	+ \$		N/A	_
		Fed OASDI	_	,	143.06	\$		N/A	_
6.	Add	I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	 6.	9	211.90	\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9	2,094.10	\$		N/A	_
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total				_			_
		monthly net income.	8a.		0.00	\$		N/A	_
	8b.	Interest and dividends	8b.	. ;	0.00	\$		N/A	<u>.</u>
	8c. 8d. 8e.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security	8c. 8d. 8e.	. :	\$ 0.00 \$ 0.00 \$ 2,288.00	\$_ \$_ \$		N/A N/A N/A	<u> </u>
		•	oe.	. ,	2,200.00	Φ_		IN/A	_
	8f. 8g. 8h.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Pension or retirement income Other monthly income. Specify: Rental Income	8f. 8g. 8h.	. :	\$ 0.00 \$ 0.00 \$ 2,200.00	\$ \$		N/A N/A N/A	<u> </u>
	OII.	Contribution fiance	_ 011.		6,400.00	* \$		N/A	_
		Contribution nance	_		0,400.00	Ψ_		IN/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	10,888.00	\$_		N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	12,982.10 + \$		N/A	= \$	12,982.10
11.	Inclionation of the Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your prince friends or relatives. In the include any amounts already included in lines 2-10 or amounts that are not a cify:	depe		•	•		e <i>J.</i> +\$	0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailies					12.	\$	12,982.10
13	Do '	you expect an increase or decrease within the year after you file this form	?					Combi month	ned ly income
	=	No.							
	1 1	Yes, Explain:							

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ation to identify yo	our case:					
Deb	tor 1	John Cosare	es				k if this is: An amended filing	
	tor 2 ouse, if filing)						A supplement shown 13 expenses as of	ving postpetition chapter the following date:
Unit	ed States Bankı	runtey Court for the	· DISTRI	CT OF NEW JERSEY		_	MM / DD / YYYY	
			. <u> </u>	01 01 11211 021(02)			WW. 7 55 7 7 7 7 7 7	
	e number 19	9-32739						
		orm 106J						
		J: Your			- Cilia a ta a tha a th			12/1
info	ormation. If m		eded, atta	If two married people ar ch another sheet to this n.				
Par 1.	t 1: Desci	ribe Your House	hold					
1.	■ No. Go to		in a separa	ate household?				
	□N	lo	·	al Form 106J-2, <i>Expense</i> s	for Separate House	hold of Deb	or 2.	
2.	Do you hav	e dependents?	■ No					
	Do not list D Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state dependents							□ No □ Yes
	aoponaonio	namoo.						□ No
								□ Yes □ No
								☐ Yes
								□ No □ Yes
3.	expenses o	penses include of people other to d your depende	han 👝	No Yes				□ Yes
Des								
Est	imate your ex	a date after the l	our bankrı	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance in Suded it on Schedule I: Y			Your exp	enses
(01	iiciai Foiiii ic	JOI. <i>)</i>					i oui onp	
4.		or home owners and any rent for the		ses for your residence. In r lot.	nclude first mortgage	4. \$		4,444.85
	If not include	ded in line 4:						
		estate taxes				4a. \$		0.00
		erty, homeowner's		's insurance ipkeep expenses		4b. \$ 4c. \$		0.00
		eowner's associat				4d. \$		0.00
5.	Additional ı	mortgage payme	ents for yo	our residence, such as ho	me equity loans	5. \$		1,193.23

ebtor 1 J	ohn Cosares	Case number	(if known)	19-32739
. Utilities	3:			
	lectricity, heat, natural gas	6a. \$		110.00
	Vater, sewer, garbage collection	6b. \$		50.00
	elephone, cell phone, Internet, satellite, and cable services	6c. \$		80.00
	Other. Specify:	6d. \$		0.00
	nd housekeeping supplies	7. \$		250.00
	are and children's education costs	8. \$		50.00
	g, laundry, and dry cleaning	9. \$		
	al care products and services	10. \$		50.00
	•			50.00
	I and dental expenses	11. \$		0.00
-	ortation. Include gas, maintenance, bus or train fare.	12. \$		100.00
	include car payments. innment, clubs, recreation, newspapers, magazines, and books	13. \$	-	100.00
		·		
	ble contributions and religious donations	14. \$		0.00
5. Insuran				
	include insurance deducted from your pay or included in lines 4 or 20.	150 ¢		0.00
	ife insurance	15a. \$		0.00
	lealth insurance	15b. \$		0.00
	ehicle insurance	15c. \$		100.00
	Other insurance. Specify:	15d. \$		0.00
	Do not include taxes deducted from your pay or included in lines 4 or 20.			
Specify:	:	16. \$		0.00
	nent or lease payments:			
	Car payments for Vehicle 1	17a. \$		0.00
17b. C	Car payments for Vehicle 2	17b. \$		0.00
17c. O	Other. Specify:	17c. \$		0.00
17d. O	Other. Specify:	17d. \$		0.00
. Your pa	ayments of alimony, maintenance, and support that you did not repo	rt as		
	ed from your pay on line 5, Schedule I, Your Income (Official Form 10			0.00
). Other p	payments you make to support others who do not live with you.	\$		0.00
Specify:	:	19.		
. Other re	eal property expenses not included in lines 4 or 5 of this form or on	Schedule I: Your	Income.	
	Nortgages on other property	20a. \$		2,015.00
20b. R	Real estate taxes	20b. \$		0.00
20c. P	roperty, homeowner's, or renter's insurance	20c. \$		0.00
	faintenance, repair, and upkeep expenses	20d. \$		0.00
	lomeowner's association or condominium dues	20e. \$		0.00
		·		
. Other: S	Specify:	21+	•	0.00
. Calcula	ate your monthly expenses			
	ld lines 4 through 21.		\$	8,593.08
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106	:1-2	\$	0,000.00
		.0 2	·	
22c. Ad	d line 22a and 22b. The result is your monthly expenses.		\$	8,593.08
. Calcula	ate your monthly net income.			
	Copy line 12 (your combined monthly income) from Schedule I.	23a. \$		12,982.10
	Copy your monthly expenses from line 22c above.	23b\$		8,593.08
23D. C	copy your monthly expenses from line 220 above.	2304		0,393.00
220 0	Libtract your monthly expenses from your monthly income		,	
	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$		4,389.02
ı	tie resuit is your <i>monthly net income.</i>	200. Ψ		.,
4 Do you	expect an increase or decrease in your expenses within the year aft	er you file this fo	rm?	
	nple, do you expect to finish paying for your car loan within the year or do you expec			ease or decrease because o
	tion to the terms of your mortgage?	,		
modificat				
■ No.				

Fill in this information to identify your case:					
Debtor 1	John Cosares First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		DISTRICT OF NEW JERSEY	,		
Case number (if known)	19-32739				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
Did you pay or agree to pay someone who is NOT an a	attorney to help you fill out bankruptcy forms?
■ No	
☐ Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
Under penalty of perjury, I declare that I have read the s that they are true and correct.	summary and schedules filed with this declaration and
X /s/ John Cosares	χ
John Cosares Signature of Debtor 1	Signature of Debtor 2
Date November 2, 2020	Date